

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	1/1485
First Inventor	Minoru OKADA
Title	Pharmaceutical Compositions Comprising Epinastine For The Treatment Of Skin Diseases
Express Mail Label No.	EV 403950629 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 49]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table,
or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets _____]
5. Oath or Declaration [Total Sheets _____]
 - a. ☐ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
name in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of
(when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure ☒ Copies of IDS
Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☒ Certified Copy of Priority Document(s) (3)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent
17. ☐ Other _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information:

Examiner _____

Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number: 28501 OR ☐ Correspondence address below

Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	Andrea D. Small	Registration No. (Attorney/Agent)	54,859
Signature	<i>Andrea D. Small</i>	Date	03/18/2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,572.00

Complete if Known

Application Number	To Be Accorded
Filing Date	03/18/2004
First Named Inventor	Minoru OKADA
Examiner Name	
Art Unit	
Attorney Docket No.	1/1485

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:Deposit
Account
Number
Deposit
Account
Name

02-2955

Boehringer Ingelheim Corporation

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	770.00
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 770.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent Claims	55	-20** =	35	X	18.00	=	630.00
Multiple Dependent	5	-3** =	2	X	86.00	=	172.00
						290.00	0.00

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 802.00)				

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type) Andrea D. Small

Registration No.
(Attorney/Agent)

54,859

(Complete if applicable)

Telephone 203/798-4816

Signature

Date

03/18/2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Boehringer Ingelheim
Pharmaceuticals Inc.

Dr. Heinz Hammann
Boehringer Ingelheim GmbH
55216 Ingelheim am Rhein
Federal Republic of Germany

March 18, 2004

NOTIFICATION OF FILING OF COMMUNICATION IN THE
U.S. PATENT AND TRADEMARK OFFICE

RE: Case No. 1/1485
Inventors: Okada, M. et al
Serial No.: To Be Accorded
Conf. No.: To Be Accorded
Filed: 03/18/2004
For: Pharmaceutical Compositions Comprising Epinastine For
The Treatment Of Skin Diseases

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ingelheim.com
900 Ridgebury Rd/P.O. Box 368
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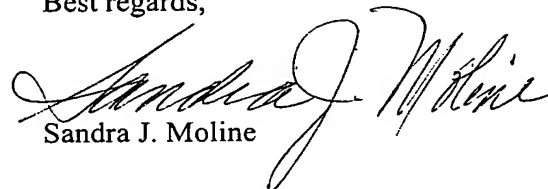
Dear Dr. Hammann:

Please note that we have, in connection with the above-referenced case, filed the following papers with the U.S. Patent and Trademark Office on March 18, 2004:

1. Utility Application for Patent Transmittal
2. Fee Transmittal for FY 2004 (In Triplicate)
3. Application Data Sheet
4. Specification (49 Pages)
5. Transmittal Letter for Information Disclosure Statement (In Triplicate)
6. Information Disclosure Statement By Applicant (Form 1449A/B), with copies of all references
7. Certified Priority Documents (3)-EP 03 007 779; EP 03 007 759; EP 03 007 778
8. Express Mail Label No. EV 403950629 US
9. Return Post Card

Copies of the listed papers are enclosed, for your records.

Best regards,


Sandra J. Moline

Enclosures



EV 403950629 US

Mailing Label
Label 11-F June 2002

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Date In Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$		Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Time In <input type="checkbox"/> AM <input type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee		Delivery Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Weight lbs. ozs.	Int'l Alpha Country Code	COD Fee	Insurance Fee	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.			
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials	Total Postage & Fees \$		NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday Customer Signature			
CUSTOMER USE ONLY METHOD OF PAYMENT: Express Mail Corporate Acct. No. X069962				Federal Agency Acct. No. or Postal Service Acct. No.			
FROM: (PLEASE PRINT) PHONE (203) 798-9988 PATENT SECTION BOEHRINGER INGELHEIM PO BOX 368 RIDGEFIELD CT 06877-0368 RPR/Legal/5067 1/1485 ADS 3/18/04				TO: (PLEASE PRINT) PHONE () Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450			

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3/ 40

F:02 T:

APPLICANT(S): Okada, M. et al
 SERIAL NO.: To Be Accorded
 CONFIRMATION NO.: To Be Accorded
 FILING DATE: 03/18/2004
 DOCKET NO.: 1/1485
 TITLE: Pharmaceutical Compositions
 Comprising Epinastine For The Treatment Of Skin Diseases

IN CONNECTION WITH THE ABOVE CASE,
 PLEASE DATE STAMP TO ACKNOWLEDGE
 RECEIPT OF THE DOCUMENTS LISTED BELOW,
 AND RETURN TO ADDRESSEE.

1. Utility Application for Patent Transmittal
2. Fee Transmittal for FY 2004 (In Triplicate)
3. Application Data Sheet
4. Specification (49 Pages)
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7. Certified Priority Documents (3)-EP 03 007 779; EP 03 007 759; EP 03 007 778

Express Mail Label No. EV 403950629 US

Mailed: March 18, 2004